



DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

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PHYSICIAN BULLETIN CRITICAL CARE POLICY CLARIFICATION

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CRITICAL CARE POLICY CLARIFICATION

Critical care is the care of critically ill patients in a variety of medical situations that require the constant attention of the physician. Examples include cardiac arrest, shock, profound hemorrhage, respiratory failure, and serious or life threatening post-operative complications.

Critical care is usually, but not always, given in a critical care area, such as the coronary care unit, intensive care unit, respiratory care unit, or the emergency care facility. Missouri Medicaid does not require an intensive care unit designation; however, the care provided must meet the definition of critical care.

The following critical care Current Procedural Terminology (CPT) codes require 24-hour direct physician supervision:

99293 – Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically care infant or young child, 29 days through 24 months of age.

99294 – Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age.

99295 – Initial inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less.

99296 – Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less.

The following codes are used for infants that do not meet the criteria for critical care but require intensive observation, numerous interventions, and other intensive services. These codes are reported once per calendar day and have the same supervision requirements as the above critical care codes.

99298 - Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present weight less than 1500 grams).

99299 - Subsequent intensive care, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams).

99300 - Subsequent intensive care, per day, for the evaluation and management of the recovering infant (present body weight of 2501-5000 grams).

Missouri Medicaid's policy on 24-hour direct physician supervision for these codes is that the physician must be on the hospital premises and immediately available to provide assistance the entire 24 hours. The physician should never be off of the premises regardless of the amount of time it takes to return to the hospital. The physician providing the 24-hour direct physician supervision must be skilled, trained and credentialed in the management of critically ill patients. The physician must have the training and education to support the high-complexity work and medical decision-making included in the critical care codes. For example, an emergency department physician may not bill for 24-hour direct supervision of a critically ill neonate in a Neonatal Intensive Care Unit (NICU). A nurse practitioner may not bill for critical care codes.

There are critical care CPT codes that can be billed to Missouri Medicaid that do not require the presence of the physician for the entire 24-hour period. The CPT codes are:

99291 – Critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes.

99292 – Critical care, evaluation and management of the critically ill or critically injured patient; each additional 30 minutes.

These codes are used to report the total duration of time spent by a physician providing constant attention to a critically ill patient. Refer to the CPT book for a complete definition of codes and information as to what services are bundled into the critical care codes.

Provider Bulletins are available on the DMS Web site at <http://dss.mo.gov/dms/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

Missouri Medicaid News: Providers and other interested parties are urged to go to the DMS Web site at <http://dss.missouri.gov/dms/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via e-mail.

MC+ Managed Care: The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

Provider Communications Hotline
573-751-2896